



CANADIAN TASK FORCE ON PREVENTIVE HEALTH CARE

October 29 - 30, 2012 Meeting

PUBLIC RECORD OF MEETING (REVISED: APRIL 2, 2013)

Present:

CTFPHC Members

Chair: Dr. Marcello Tonelli	Dr. James Dickinson
Vice-Chair: Dr. Richard Birtwhistle	Dr. Gabriela Lewin
Dr. Maria Bacchus	Dr. Patricia Parkin (teleconference)
Dr. Neil Bell	Dr. Elizabeth Shaw
Dr. Paula Brauer	

Public Health Agency of Canada (PHAC)

Dr. Sarah Connor Gorber	Chantal Plante
Ernesto Delgado	Dana Reid
Dr. Lesley Dunfield	Amanda Shane
Dr. Karen Grimsrud	

University of Alberta

Brandee Borne	Dawn Ogenorth
Alejandra Jaramillo	

Evidence Review and Synthesis Centre

Dr. Donna Ciliska	Mary Gauld
Donna Fitzpatrick Lewis	Dr. Parminder Raina

Regrets:

Dr. Michel Joffres	Dr. Harminder Singh
Dr. Kevin Pottie	Dr. Sharon Straus

Guests:

Leigh Cotton	David Rodier
Dr. Julia Moore	Dr. Ming Yu (teleconference)

Note Taking

Diane Finkle Perazzo, Wordsmith Writing and Editing Services

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Draft Public Record of Meeting

1 Welcome and Meeting Document Review

Members reviewed the minutes of the previous meeting and noted action items that were completed. CTFPHC members reviewed and approved the Minutes and Action Items from the June 2012 Teleconference.

2 Debrief on Diabetes

David Rodier and Leigha Cotton, Hill and Knowlton joined the meeting to debrief on the recent release of the Diabetes Guidelines. The Canadian Task Force on Preventive Health Care released an updated guideline calling for more precision in type 2 diabetes screening. The Guideline was published in the CMAJ on October 16th, 2012 and distributed to national media on the same day. Coverage from the outreach totalled more than 3.5 million media impressions across Canada. The coverage was balanced with key messages and spokesperson quotes prominent in most of the stories.

3 Adult Obesity Working Group Update

Paula Brauer provided an update regarding the work of the Adult Obesity Working Group. She outlined the purpose and background of this CPG and presented the June 29/12 version of the analytic framework for primary and secondary prevention interventions for normal weight, overweight and obese adults. Next steps will be to draft recommendations and decision tables by Nov 12, conduct the de novo review for Adult KQ1 and wait for the update of Australian review in the summer of 2013.

4 Childhood Obesity Working Group Update

Patricia Parkin provided an update regarding the work of the Childhood Obesity Working Group research questions and timelines. The Working Group will continue to meet with the Adult Obesity Working group and members will examine Cochrane SR and Australian Guidelines along with original articles.

5 Endorsement and Critical Appraisal

Amanda Shane presented information about an integrated process for endorsement and critical appraisal. CTFPHC members noted that endorsement is challenging and there is still a need to consider a number of options and processes before adopting an endorsement protocol. Overall it was agreed that the CTFPHC needs to move forward and adopt a process for critical appraisal and endorsement.

Canadian Task Force on Preventive Health Care

Draft Public Record of Meeting

6 Screening for Prostate Cancer with PSA

The CTFPHC reviewed issues related to development of a CTFPHC guideline on screening for prostate cancer and examined an analytic framework and protocol development process. A number of options for moving forward were considered.

7 Timelines

Alejandra Jaramillo reviewed a chart which summarized the timelines (to date) for the development of guidelines for breast cancer, diabetes, depression, hypertension, cervical cancer, adult obesity, child obesity, cognitive impairment, colorectal cancer and prostate guidelines. She noted that although timelines have varied, the CTFPHC has now developed enough CPGs to provide historical information and to determine average processing times.

8 Implications of Contribution Agreement

Marcello informed the CTFPHC members that the non scientific proportion of the funding for the CTFPHC had been moved from the Public Health Agency of Canada into a contribution agreement with the University of Alberta. The Public Health Agency will continue to manage the scientific aspects of the CTFPHC's work and the work of the ERSC as well as monitor the grant through its Gs and Cs program. The CTFPHC thanked Marcello, Karen and Chantal for all their hard work ensuring that this process flowed smoothly.

9 Independence of the Review Process

Marcello Tonelli stressed the important of the independent review process undertaken by the CTFPHC. This process is scientifically independent and based on evidence which is obtained and reviewed by the ERSC.

10 ERSC and TF Relations

CTFPHC members agreed they were very impressed by the work of the ERSC and appreciated the back and forth discussion that takes place for each guideline.

11 ERSC Update

Parminder Raina provided an update on the work of the ERSC. It is expected that as the ERSC grows that additional streamlining and capacity will improve. The USPSTF is currently involved in a number of process oriented projects and the ERSC and the CTFPHC might play a role in some of these such as sharing methods and avoiding duplication of efforts.

Canadian Task Force on Preventive Health Care

Draft Public Record of Meeting

12 Colorectal Cancer WG Update

Maria Bacchus updated the CTFPHC members regarding the progress of the Colorectal Cancer Working Group. The Colorectal Cancer CPG will focus on screening in asymptomatic average risk populations. A new CPG is warranted because of newer screening modalities and a need to further define who, how often and when to screen. Next steps for the Working Group will include finalizing the key and contextual questions, finalizing inclusion and exclusion criteria, ranking outcomes and harms, developing a draft protocol and conducting a high level search for risk assessment tools.

13 Cervical Cancer Working Group Update

Jim Dickinson reported that the Cervical Cancer CPGs have been accepted by the CMAJ for publication in January. Work on the KT materials has begun and it is hoped that KT Tools will be drafted by December 15.

14 CTFPHC Office Update

Karen provided an update regarding changes that have taken place at the CTFPHC Office. Although the office has lost temporary and permanent staff due to cutbacks at the Agency, it has gained three professional staff and there are now five permanent positions for the science team. Karen welcomed several new staff members including Dana Reid who will be leading work on the public health guidelines and other Canadian systematic reviews and Ernesto Delgado who will be facilitating meeting logistics on behalf of the Agency.

15 Break Out Sessions

At the end of Day One, several of the Working Groups held meetings.

DAY TWO

16 Recap Day One and Discussion of CTFPHC Meeting Dates for 2013

Marcello Tonelli welcomed the members to the second day of the CTFPHC Meeting. Members discussed the value of different online meeting and file sharing programs. Meeting dates for 2013 will be sent by e-mail

17 Methods Working Group Update

Sarah Connor Gorber reviewed the Task Force publications strategy and provided an update on new processes such as selecting high risk groups and the scoping process.

Canadian Task Force on Preventive Health Care

Draft Public Record of Meeting

18 Depression Working Group Update

Alejandra Jaramillo updated the CTFPHC on the results of the ERSC evidence review. The ultimate goal of screening for depression is to decrease the incidence and mortality related to this disease. Although the scope of the ERSC review included outcomes beyond incidence or mortality, there is limited research evidence from which to draw any conclusions about the effectiveness of screening for depression in the general or high risk populations.

19 Hypertension Working Group Update

The Hypertension CPGs have been announced at a recent CHEP meeting and have been released on the website.

20 eHealth / EMR Working Group Update: There's an App for That!

Ming Yu joined the meeting by teleconference and presented a proposal for a multiplatform mobile framework for the delivery of Task Force CPGs. Following Ming's presentation, the CTFPHC agreed that the application was worthwhile and its cost appeared reasonable. It was agreed that the project not be tendered competitively however, further information should be obtained regarding potential ongoing and future costs.

21 CLASP Funding

Rick Birtwhistle mentioned that CLASP is providing funding that might be used by the CTFPHC to implement guidelines into practice as a knowledge exchange exercise. Proposals should be submitted by January 2013 for funding in October 2013.

22 Performance Indicators Update

Alejandra Jaramillo provided an update from the Methods Working Group on performance indicators. She reviewed the CTFPHC process to develop indicators.

23 Vision for Patient Preferences

Marcello provided an outline of a proposed patient engagement approach and solicited feedback from the CTFPHC. Marcello stressed that engagement needs to be beneficial to all parties involved and that there is evidence that patient involvement improves the quality of CPG and related materials. In the current CPG development process, patient/consumers would ideally be involved during the development of key questions/analytical framework and during the development of recommendations and KT tools.

Canadian Task Force on Preventive Health Care

Draft Public Record of Meeting

24 Cognitive Impairment Working Group Update

Lesley Dunfield provided an update on the work of the Cognitive Impairment Working Group. The CTFPHC members discussed a variety of options and it was agreed that further research and discussion was required before a decision could be made.

25 KT Working Group Update

Julie Moore updated the CTFPHC on the efforts of the KT Working Group including the development of Breast Cancer Screening Tools; Type 2 Diabetes Screening Tools, Hypertension Screening Tools, Cervical Cancer Screening Tools and the CTFPHC Website. She reviewed some of the challenges faced in developing KT tools such as timelines, multiple versions, etc.

26 Break Out Sessions

At the end of Day Two, several of the Working Groups held meetings.

27 Next Steps and Adjourn

Marcello Tonelli and Richard Birtwhistle thanked all present for their hard work and excellent contributions.